

P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Priority Claimed

Page 1 of 2
(Rev. 05/2004)

I hereby appoint the practitioners at **CUSTOMER NO. 02292** as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000

Facsimile: (703) 205-8050

PLEASE NOTE:
YOU MUST
COMPLETE
THE
FOLLOWING:

Full Name of First
or Sole Inventor:
Insert Name of
Inventor
Insert Date This
Document is Signed

Insert Residence
Insert Citizenship

Insert Post Office
Address


Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

Full Name of Fourth
Inventor, if any:
see above

Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

| | | |
|---------------------------------------------------------------------------|------------------------------------------------------------------------------------|---------------|
| GIVEN NAME/FAMILY NAME | INVENTOR'S SIGNATURE | DATE* |
| Hanspeter STEFFEN |  | 08 March 2005 |
| Residence (City, State & Country) | CITIZENSHIP | |
| Utzenstorf, Switzerland | Swiss | |
| MAILING ADDRESS (Complete Street Address including City, State & Country) | | |
| Lindenstrasse 39, CH-3427, Utzenstorf, Switzerland | | |
| GIVEN NAME/FAMILY NAME | INVENTOR'S SIGNATURE | DATE* |
| Residence (City, State & Country) | CITIZENSHIP | |
| MAILING ADDRESS (Complete Street Address including City, State & Country) | | |
| GIVEN NAME/FAMILY NAME | INVENTOR'S SIGNATURE | DATE* |
| Residence (City, State & Country) | CITIZENSHIP | |
| MAILING ADDRESS (Complete Street Address including City, State & Country) | | |
| GIVEN NAME/FAMILY NAME | INVENTOR'S SIGNATURE | DATE* |
| Residence (City, State & Country) | CITIZENSHIP | |
| MAILING ADDRESS (Complete Street Address including City, State & Country) | | |
| GIVEN NAME/FAMILY NAME | INVENTOR'S SIGNATURE | DATE* |
| Residence (City, State & Country) | CITIZENSHIP | |
| MAILING ADDRESS (Complete Street Address including City, State & Country) | | |
| GIVEN NAME/FAMILY NAME | INVENTOR'S SIGNATURE | DATE* |
| Residence (City, State & Country) | CITIZENSHIP | |
| MAILING ADDRESS (Complete Street Address including City, State & Country) | | |